

#### **Instructions**

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

## Identifying information.

## 2. The work under consideration for publication.

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## 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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**Royalties:** Funds are coming in to you or your institution due to your patent

Crookshank 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Meghan	rst Name)	2. Surname (Last Name) Crookshank		3. Date 17-December-2017	
4. Are you the cor	Are you the corresponding author? Yes Volume No Corresponding Author's Name Radovan Zdero				
Biomechanical T		Model	pial Fractures (RUST) u	sing Micro-CT Scanning and	
Section 2.	The Work Under Co	onsideration for Pub	lication		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	y but not limited to grants, est? Yes No prmation below. If you h	data monitoring board, s	nent, commercial, private foundation, etc.) for study design, manuscript preparation, tity press the "ADD" button to add a row.	
Name of Institut	ion/Company	Grant? Personal N	on-Financial Other	? Comments	
Orthopaedic Trauma	Association	<b>✓</b>			
	ı				
Section 3.	Relevant financial	activities outside the	submitted work.		
of compensation clicking the "Adc Are there any rel	n) with entities as descri	ibed in the instructions. port relationships that w	Use one line for each e ere <b>present during th</b>	ncial relationships (regardless of amount entity; add as many lines as you need by he <b>36 months prior to publication</b> .	
Section 4.	Intellectual Proper	rty Patents & Copy	rights		
Do you have any	patents, whether plan	ned, pending or issued,	broadly relevant to the	e work? Yes V No	

Crookshank 2



Section 5.	
Section 5.	Relationships not covered above
	lationships or activities that readers could perceive to have influenced, or that give the appearance of acing, what you wrote in the submitted work?
Yes, the follow	ring relationships/conditions/circumstances are present (explain below):
✓ No other relati	ionships/conditions/circumstances that present a potential conflict of interest
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. nals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
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Dr. Crookshank re	eports grants from Orthopaedic Trauma Association, during the conduct of the study; .

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Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Crookshank 3



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Fiset 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Sandra	rst Name)	2. Surname (Last Name) Fiset		3. Date 11-December-2017
4. Are you the cor	responding author?	uthor's Name		
Biomechanical T		: Model	oial Fractures (RUST	) using Micro-CT Scanning and
Section 2.	The Work Under Co	onsideration for Pub	ication	
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	s but not limited to grants, onest?  Yes No prmation below. If you have	data monitoring board	rnment, commercial, private foundation, etc.) for d, study design, manuscript preparation, entity press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant	on-Financial Support?	er? Comments
Orthopaedic Trauma	Association	<b>V</b>		
	ı			
Section 3.	Relevant financial	activities outside the	submitted work	
of compensation clicking the "Add Are there any rel	) with entities as descri	ibed in the instructions. Uport relations w	Jse one line for eac	nancial relationships (regardless of amount h entity; add as many lines as you need by g the 36 months prior to publication.
Section 4.	Intellectual Proper	ty Patents & Copyr	ights	
Do you have any	patents, whether plan	ned, pending or issued, l	oroadly relevant to	the work? ☐ Yes ✓ No

Fiset 2



Section 5. Polationships not severed above
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Yes, the following relationships/conditions/circumstances are present (explain below):
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Godbout 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Charles	rst Name)	2. Surname (Last Nam Godbout	e)	3. Date 30-Octob	per-2017
4. Are you the cor	responding author?	nor?			
Biomechanical T		Model	Γibial Fractures (F	RUST) using Micro-CT Sca	inning and
Section 2.	The Work Under Co	onsideration for Pu	blication		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	g but not limited to grant est?  Yes  Normation below. If you	s, data monitoring	government, commercial, p board, study design, manu one entity press the "AD	script preparation,
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
Orthopaedic Trauma	Association	<b>✓</b>			
	ı				
Section 3.	Relevant financial	activities outside t	ne submitted v	work.	
of compensation clicking the "Add Are there any rel	) with entities as descri	ibed in the instructions port relationships that —	s. Use one line for were <b>present du</b>	ve financial relationships r each entity; add as man uring the 36 months pri	ny lines as you need by
Section 4.	Intellectual Proper	rty Patents & Cop	yrights		
Do you have any	patents, whether plan	ned, pending or issued	d, broadly relevar	nt to the work? Yes	✓ No

Godbout 2



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Nauth 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Aaron	2. Surname (Last Name) Nauth		3. Date 12-March-2018	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	r's Name	
5. Manuscript Title Experimental Validation of the Radiogra Biomechanical Testing in an In-Vivo Rat		l Fractures (RUST) usi	ng Micro-CT Scanning and	
6. Manuscript Identifying Number (if you known/a	ow it)			
		-		
Section 2. The Work Under Co	nsideration for Public	ation		
Did you or your institution <b>at any time</b> receivany aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of intere	but not limited to grants, da			.) for
If yes, please fill out the appropriate info Excess rows can be removed by pressing	rmation below. If you hav	e more than one enti	ty press the "ADD" button to add a r	ow.
Name of Institution/Company	Grant? Personal Nor	n-Financial Other?	Comments	
Orthopaedic Trauma Association	<b>✓</b>			
Section 3. Relevant financial a	activities outside the s	ubmitted work.		
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report there any relevant conflicts of interesting the serious fill out the appropriate info	oed in the instructions. Us ort relationships that wer st?	e one line for each en	tity; add as many lines as you need	
Name of Entity	Grant? Personal Nor	n-Financial Other	Comments	
		upport?		
OTA, CIHR, PSIF, OTC				
Stryker, Smith and Nephew				

Nauth 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No
Section 5. Relationships not covered above
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Identifying Info	ormation	
1. Given Name (First Name) Emil	2. Surname (Last Name) Schemitsch	3. Date 13-March-2018
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Radovan Zdero
5. Manuscript Title Experimental Validation of the Radio Biomechanical Testing in an In-Vivo		al Fractures (RUST) using Micro-CT Scanning and
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any aspect of the submitted work (inclustratistical analysis, etc.)?	ding but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of in		
If yes, please fill out the appropriate Excess rows can be removed by pres		re more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Other? Comments
Orthopaedic Trauma Association	<b>✓</b>	
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Name of Entity	Grant*	n-Financial Other? Comments
Stryker		Institutional research support
Smith& Nephew		Institutional research support
Acumed		



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Amgen		<b>√</b>			
Sanofi		$\checkmark$			
Pendopharm		$\checkmark$			
ITS			$\checkmark$		
Zimmer		$\checkmark$		<b>✓</b>	Institutional research support
Synthes				<b>✓</b>	Institutional research support
Do you have any patents, whether plann	•			nt to the	work? ☐ Yes 🗸 No
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Dr. Schemitsch reports grants from Orth other from Stryker, personal fees and otl personal fees from Sanofi, personal fees Zimmer, other from Synthes, outside th	ner from from from Per	Smith& Ne <sub>l</sub> Idopharm,	phew, personal fe	es from A	Acumed, personal fees from Amgen,



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## Identifying information.

## 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

#### 3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

## 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

# Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

Zdero 1



Section 1. Identifying Information	ation			
1. Given Name (First Name) Radovan	2. Surname (Last Name) Zdero			3. Date 04-October-2017
4. Are you the corresponding author?	✓ Yes No			
5. Manuscript Title Experimental Validation of the Radiogra Biomechanical Testing in an In-Vivo Rat	-	bial Fractures (F	RUST) usir	ng Micro-CT Scanning and
6. Manuscript Identifying Number (if you known/a	ow it)			
Section 2. The Work Under Co	nsideration for Pub	lication		
Did you or your institution <b>at any time</b> receivany aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interesting the state of the	but not limited to grants,	data monitoring	board, stu	idy design, manuscript preparation,
If yes, please fill out the appropriate info Excess rows can be removed by pressing		ave more than	one entit	ry press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal N	on-Financial Support?	Other?	Comments
Orthopaedic Trauma Association	<b>✓</b>			
Section 3. Relevant financial a	activities outside the	e submitted v	work.	
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report there any relevant conflicts of interest lf yes, please fill out the appropriate info	oed in the instructions. ort relationships that w st?	Use one line fo vere <b>present du</b>	r each en	tity; add as many lines as you need by
Name of Entity	Grant? Personal N	on-Financial Support <sup>?</sup>	Other?	Comments
Elsevier (New York, USA)				book royalties
Sawbones (Vashon, WA, USA)	<b>✓</b>			

Zdero 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No
Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Zdero reports grants from Orthopaedic Trauma Association, during the conduct of the study; personal fees from Elsevier (New York, USA), grants from Sawbones (Vashon, WA, USA), outside the submitted work.

#### **Evaluation and Feedback**

 $Please\ visit\ \underline{http://www.icmje.org/cgi-bin/feedback}\ to\ provide\ feedback\ on\ your\ experience\ with\ completing\ this\ form.$ 

Zdero 3